JUN 1 1 2005	this form, together wi	th applicable fee	or <u>Fax</u>	Mail Stop ISSU Commissioner f P.O. Box 1450 Alexandria, Vir (703) 746-4000		hould be completed where
maintenance fee notificano	below or directed otherwises. CE ADDRESS (Note: Use Block I fo		specifying a new			
	•	, ny vinago vi sazono		Fee(s) Transmittal. To papers. Each addition	f mailing can only be used finds certificate carmot be used an import, such as an assignment of mailing or transmission.	or domestic manings of the for any other accompanying ent or formal drawing, must
	590 05/27/2005 TOORE LTD					
BANNER & WI 1001 G STREET,				I bereby certify that t	rtificate of Malling or Trubs his Pec(s) Tememittal is bein	enhatos a deposited with the United
WASHINGTON,				addressed to the Ma	his Pec(s) Transmittal is being with sufficient postage for fire a Stop ISSUE FEE address	st class mail in an cavelope above, as being facaimile
5/2005 CNGUYEN1 00000	013 190733 106333	61		transmitted to the US	PTO (703) 746-4000, on the o	late indicated below, Depositors name)
C:1501 1400.00	NΔ			12 6 1	B4/25/2 5, 145	(Signature)
C:1504 300.00				139-7.19	6-14-0	
					· · · · · · · · · · · · · · · · · · ·	
	APPLICATION NO. FILING DATE		FIRST NAMED INVE		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/633,361	08/04/2003		John F. Swigar		⁹ ···005127,85920	5126
APPLN. TYPE	SMALL ENITTY	ISSUE FEE	P	UBLICATION FEB	TOTAL FEE(S) DUE	DATE DUB
Deubloarenoum	nenprovisional NO			\$300	\$1700	08/29/2005
EXAMINER		ART UNIT		LASS-SUBCLASS		
KAVANAUGH, JOHN T		3728		036-029000		
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) amached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Castome Number is required.			registered attorney or agent) and the names of up to			
ASSIGNEE NAME AND PLEASE NOTE: Unlease recordation as set forth in			-		nee is idensified below, the d	ocument has been filed for
(A) NAME OF ASSIGN				ry and State or co		
NIKE, MC		Be	carerton,	torean	•	
(Olde)	· .	-	, , ,	G-85°	•	
Please check the appropriate	assignee category or catego	ries (will not be print	ed on the patent) :	☐ Individual ☐ C	osporation or other private gro	oup entity Government
4a. The following fee(s) are	enclosed:		syment of Fee(s):		•	
Lissue Fee	M. cothe discours			nount of the fee(s) is er		
Publication Fee (No small entity discount permitted) Advance Order - # of Copies			Psyment by cradif Yorni P10-2038' is stricted. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0723 (enclose an extra copy of this form).			
5. Change in Entity States a. Applicant claims Si	(from status indicated above	*)	-		LL ENTITY status. See 37 Cl	
The Director of the USPTO NOTE: The lasus Foc and Printerest as shown by the reco	is requested to apply the Issuablication Fee (if required) wites of the United States Pan	ue Fee and Publication will not be accepted fr ent and Trademark Of	Fee (if any) or to om anyone other (re-coply any previous han the applicant, a reg	y paid issue fee to the applica istered attornoy or agent; or th	tion identified above.
	Br-916-			Date	6-14-05	
Authorized Signature	/-					
Authorized Signature Typed or printed name	BYRONS, KU	zana		Registration	Na. 51, 255	